# Minutes of the RURAL HEALTH ADVISORY COMMISSION

Friday, June 18, 2010 1:30 p.m. – 4:00 p.m.

NE DHHS – 220 Bldg., Conference Room LL-A 220 S. 17<sup>th</sup> Street; Lincoln, Nebraska

<u>Members Present:</u> Kathy Boswell; Marty Fattig; Mark Goodman, M.D.; Suzanne Greenquist, D.O.; Jackie Miller (arrived at 2:08 p.m.); Peggy Rogers; Rebecca Schroeder, Ph.D.; Mike Sitorius, M.D.; Sharon Vandegrift, R.N.; Roger Wells, P.A.C.

Members Absent: Scot Adams, Ph.D.; Doug Dilly, M.D.; Shawn Kralik, D.D.S

Office of Rural Health Staff Present: Dennis Berens, Marlene Janssen, Tom Rauner, Deb Stoltenberg, Mike Gilligan (intern), Monica Sanford (intern)

Guests: Mary Torell, Senator Louden's aide (District #49)

# 1. Call meeting to Order; Open Meetings Act & Agenda Posted; Adopt Agenda; Approve Minutes of February 26, 2010, Meeting; Introduce Members and Guests

Dr. Rebecca Schroeder, Chair, called the meeting to order at 1:38 p.m. She announced that the Open Meetings Act and agenda were posted by the door.

Roger Wells moved to adopt the agenda. Dr. Mark Goodman seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Rogers, Sitorius, Vandegrift, and Wells; NO: None; Absent: Adams, Dilly, Kralik, and Miller.

Marty Fattig moved to approve the minutes of the February 26, 2010, meeting. Dr. Mike Sitorius seconded the motion. Motion Carried. Yes: Boswell, Fattig, Goodman, Greenquist, Rogers, Sitorius, Vandegrift, and Wells; NO: None; Absent: Adams, Dilly, Kralik, and Miller.

Guests, members, and staff introduced themselves.

Dr. Rebecca Schroeder announced that today was Dr. Suzanne Greenquist's last meeting as a member of the Commission and thanked her for her service.

#### 2. Administrative Items

# • Next Meeting: Wednesday, September 15, 2010, 6:30 p.m., Kearney, NE

Dr. Rebecca Schroeder announced that the next meeting is scheduled for Wednesday, September 15, 2010 in Kearney to begin at 6:30 p.m. The Nebraska Rural Health Conference will be in Kearney on September 16 and 17, 2010.

Deb Stoltenberg explained that room reservations for the Kearney meeting and conference need to be made immediately because the conference is at the same time as Husker Harvest Days; so motel rooms will be at a premium. Conference registration material will go out soon. Commission members should let Ms. Stoltenberg know if they will be attending the Kearney meeting and/or the conference.

## • Accountability and Disclosure Commission, Form C-2

Marlene Janssen stated that any Commission member who may benefit financially from a vote must abstain from voting and complete and submit a Form C-2 the Accountability and Disclosure Commission. This form is used by any government entity when a member has to abstain from a vote because of a potential financial impact.

• Program 175 Regulation Hearing – Tentative date: July 15, 2010; 10:00 a.m.

Ms. Janssen announced that a regulation hearing is scheduled for the rural incentive programs. The hearing will be held July 15, 2010 at 10:00 a.m. The regulations have already been reviewed and approved by the Commission.

# 3. Program Committee and 2010 State-Designated Shortage Areas

- State Incentive Recipients "Contact Hours"
- Shortage Area Guideline Revisions

Peggy Rogers reported that members of the Program Committee met via telephone conference call on Wednesday, May 19, 2010 to discuss the "state-designated shortage areas." The Program Committee reviewed the guidelines for "state-designated shortage areas." Marlene Janssen noted that counties with full-time equivalency (FTE) counts less than 1 resulted in population to FTE ratios greater than the county's population. To reconcile this, Ms. Janssen created a formula to insert the county's population if the population to FTE ratio was greater than the county's population. There was still the concern of "full employment" in a county so the Program Committee approved the following change to the medical specialties, mental health, general dentistry, pharmacist, occupational therapy, and physical therapy guidelines:

"If the population to FTE ratio is greater than the population of the service area, the population of the service area will be entered as the ratio. The Rural Health Advisory Commission will review individual concerns about full employment of a service area."

For clarification purposes, what this means is if a county with a population of 5,000 has 0.1 Psychiatrist FTE their population to FTE ratio would be 5,000. The guideline for designating the county a psychiatric/mental health shortage area is 10,000 to 1.0 FTE. This means the county could support a psychiatrist or mental health provider at 0.5 FTE. Therefore, the county may request a psychiatrist/mental health shortage area designation from the RHAC based on the "full employment" guideline.

The Program Committee reviewed and briefly discussed the shortage area listings comparing 2007 and 2010. There were some counties that are no longer shortage areas and others that were added.

At the February 2010 Rural Health Advisory Commission (RHAC) meeting the Commission asked the Program Committee to look at incentive recipient contact hours. It should be noted that the RHAC did act on this at the February meeting and the Program Committee concurs that individual cases will be reviewed if necessary but the RHAC should not set specific parameters.

The Program Committee approved the guidelines, with the change mentioned previously and the 2010 shortage areas for the 30-day public comment period.

Roger Wells moved to approve the Program Committee's revisions to the state shortage area guidelines. Sharon Vandegrift seconded the motion. Motion carried. Yes: Boswell, Fattig, Goodman, Greenquist, Rogers, Sitorius, Vandegrift, and Wells; NO: None; Absent: Adams, Dilly, Kralik, and Miller.

## • 2010 Public Comment Period ends June 25, 2010

o Discuss Comments Received to-date

Marlene Janssen reviewed the public comments received to-date and explained how the primary care specialties are counted. Ms. Janssen reported that she made changes to the FTE counts in question after working with the local entity and the University of Nebraska Medical Center's Health Professions Tracking Services (UNMC HPTS).

Marlene Janssen asked the Commission to discuss comments received from Jefferson County concerning how physical therapists and occupational therapists are counted. As Ms. Janssen explained in an email to Jefferson County, which was copied to commission members, the RHAC worked with the Physical Therapist Association to establish the shortage area guidelines. By statute, the RHAC must look at the *latest reliable statistical data available regarding the number of health professionals practicing in the area.* The best data available for physical therapists and occupational therapists is the licensure database which identifies the health professional by the address they use to renew their licenses. Since this may over or under state the number of health professionals actually practicing in the area, the RHAC and Physical Therapist Association agreed to lower the population to PT ratio.

Tom Rauner noted that while the Physical Therapy Association could be asked to survey association members, the survey must be conducted on an on-going basis. Dr. Schroeder voiced concern that not all therapists may be members of a state association so the count by the professional association for rural/non-rural may not be accurate. While an individual's license address may not correctly identify whether the individual works in a rural or non-rural area, the Commission agreed that licensure is the best data available.

Marlene Janssen reported that after consulting with the UNMC HPTS and the Department of Health and Human Services (DHHS) Emergency Medical Services (EMS) office, Garden County's FTE count for family practice physicians was changed to 0.8 FTE.

Ms. Janssen reported that a Hall County family practice physician submitted a letter requesting a review of the guidelines to include Hall County as a family practice shortage area. After some discussion the Commission agreed that based on the family practice guidelines Hall County does not meet the criteria because the population of Hall County is greater than 15,000. Marlene Janssen also noted that prior to

2000 when the RHAC changed the family practice shortage area guidelines; Hall County did not meet the criteria for a state-designated family practice shortage area.

Jackie Miller, Commission member, arrived at 2:08 p.m.

Dr. Mark Goodman moved to have Dr. Rebecca Schroeder send letters to Hall and Jefferson Counties stating that the Commission will not be changing the state-designated shortage area guidelines as requested by these counties and to approve the FTE count for Garden County as determined by the Office of Rural Health. Roger Wells seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, and Wells; NO: None; Abstain: Vandegrift; Absent: Adams, Dilly, and Kralik.

Peggy Rogers moved to have the Office of Rural Health determine shortage area status based on the guidelines for any public comments received between June 18, 2010 and June 25, 2010, which is the end of the 30-day public comment period, and approve the 2010 shortage areas with the addition of Chase and Johnson Counties with an effective date of July 1, 2010. Sharon Vandegrift seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, and Wells; NO: None; Absent: Adams, Dilly, and Kralik.

# • Review Community Health Center Requests

Marlene Janssen reported that all federally qualified Community Health Centers are eligible for state designated shortage areas for family health practice and general dentistry only (according to guidelines) but they must submit a request to the RHAC and be approved by the Commission. Ms. Janssen reviewed the requests from the Community Health Centers for state designation as shortage areas for family practice and/or general dentistry.

Ms. Janssen reported that One World Community Health Center submitted a request to consider all the underserved population areas served by One World. The RHAC discussed One World's request. It was determined that One World's concern goes to the state guidelines for shortage area designation. The State of Nebraska's Rural Health Systems and Professional Incentive Act along with the Rural Health Advisory Commission's focus is on rural not on all underserved populations. While there is a concern about underserved populations, there is limited funding available through the State. One World does have access to federal dollars while most of Nebraska's rural communities do not. Dr. Schroeder will send a letter to One World stating the Commission's decision.

Dr. Mark Goodman moved to approve the following requests for state-designated family practice and general dentistry shortage areas: One World Community Health Center (Omaha & Plattsmouth), Charles Drew Health Center (Omaha). Norfolk Community Health Care Clinic, Community Action Partnership of Western Nebraska (Gering & Chadron (general dentistry only)), People's Health Center (Lincoln), Ponca Tribe of Nebraska – Fred LeRoy Health & Wellness Center (Omaha), Nebraska State Penitentiary (Lincoln), and Lincoln Correctional Facility. Dr. Suzanne Greenquist seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, and Wells; NO: Sharon Vandegrift; Absent: Adams, Dilly, and Kralik.

#### 4. Policy Committee Report & Legislative Update/Proposals

Marty Fattig stated that his report requires no formal action by the Commission but he would like feedback from the Commission. Mr. Fattig began by explaining that LB 420 would have given a sales tax exemption to provider based Certified Rural Health Clinics (CRHC) which, from the rural hospital's point of view, are

just another department of the hospital and handled as such by the hospital's accounting department. However, the Nebraska Department of Revenue has identified rural health clinics (CRHC) as non-exempt from the sales tax based on their laundry list of facilities that are exempt. While the Legislature passed LB 420 in 2010 with an effective date in three years, the bill was vetoed by the Governor. That means the Revenue Department considers the clinics subject to sales tax right now. Mr. Fattig explained that there is a misunderstanding on the fiscal note. The issue is that this sales tax has never been collected so there is *no decrease* in state revenue which is how the fiscal note was written. Mr. Fattig stated that the members of the Rural Health Advisory Commission need to inform and educate each of their state senators on this issue. Commission members are the "resident" experts on this type of rural issue and we need to advise the Legislature and Governor accordingly.

Marty Fattig noted that the economy does look like it is leveling off and there is still a large shortfall. The Governor has made it very clear he will not balance the budget at the expense of education. Mr. Fattig stated that Medicaid is one of the largest expenditures of state funds and rural hospitals and clinics need to work diligently to educate the legislature on determining a reasonable rate. This is a crucial issue for rural health systems.

Dr. Schroeder asked if Mr. Fattig had any feel for the legislative climate concerning Medicaid. Mr. Fattig stated he thinks that the legislative and executive branches of government do not believe a 10% cut in Medicaid will affect rural hospitals. This is because many rural hospitals are building onto their facilities, which is viewed as being prosperous. Mr. Fattig stated that, according to a recent article he read, approximately 38% of critical access hospitals lose money every year.

Mr. Fattig encouraged everyone to read LB 999, the private hospital moratorium bill. While there is a moratorium on building new hospitals, the physician-owned Kearney hospital is still being built. Kearney received an exception and is proceeding with building plans. According to Marty Fattig, the new physician-owned Kearney hospital has to be completed before the end of 2010 to be in compliance with the federal law. Mr. Fattig stated that there is more to LB 999 than just establishing a moratorium on building new hospitals; it also requires studying the need for such hospitals.

Legislative Resolutions for 2010 were included in Commission members' packets. Mr. Fattig noted that there are several studies concerning immigrant care and not providing prenatal care for unborn children qualifying for Medicaid. Mr. Fattig stated that he had received a letter from Senator Kathy Campbell requesting help on LR 501, a legislative study to look at the impact of not providing prenatal care to unborn children qualifying for Medicaid. A copy of Senator Kathy Campbell's letter will be emailed to Commission members.

Related to the issue of immigrant care, Dr. Rebecca Schroeder announced that a senator from her area is considering introducing legislation similar to that in Arizona concerning illegal immigrants.

Marty Fattig announce that the annual Nebraska Rural Health Conference will be held September 16 and 17 in Kearney, Nebraska. State Senators will be asked to attend.

Reporting on the federal level, Marty Fattig said there was a success in the health reform act and that is the tax relief for state loan repayment programs. He noted that this was done with the assistance of Senator Ben Nelson and his staff.

Medicare payment cuts to physicians have been deferred through November 2010. This is a temporary fix, as per Mr. Fattig, because a permanent fix would increase the cost of the health care reform legislation.

Mr. Fattig reported that the physician supervision rule is a huge issue for rural hospitals. Diagnostic testing and diagnostic treatment for outpatient services require a physician to be present on-site to monitor these treatments and testing. If the patient is admitted to the hospital the physician does not have to be on-site for many of these treatments. A moratorium has been issued on this rule and it is being reviewed.

Mr. Fattig reported that there are new requirements in the Healthcare Reform legislation to require hospitals to do a community benefit study every 3 years to maintain tax-exempt status. Also new requirements for posting notice of charity care.

Marty Fattig announced that he has been asked to serve on the national Health Information Technology (HIT) Policy Committee's Meaningful Use Workgroup. The Commission thanked him for his efforts.

Dennis Berens handed out community populations based on the 2000 Census and a Health Reform Summary on pharmacy and prescription drugs. Mr. Berens noted that independent rural pharmacies are being squeezed.

Marlene Janssen reported that she received a press release titled, "Sebelius Announces New \$250 Million Investment to Strengthen Primary Health Care Workforce." According to this announcement, the investments "will support the training and development of more than 16,000 new primary care providers over the next five years." Ms. Janssen asked if any Commission members understood what this may mean; does this mean that there will be an expansion of slots in medical schools for primary care? Dr. Mark Goodman replied that students tell him they cannot afford to pursue primary care because the pay is too low and their student loan debt is too high. Dr. Mike Sitorius stated that putting 500 new positions into primary care residencies when students are not interested in primary care is folly. It is difficult to discern what is meant by funding nurses to go from one program to another program or 10 experimental programs for nurse-led clinics. In addition, \$250 million may sound like a lot of money but it does not go very far with the projected primary care shortages for physicians, nurse practitioners, dentists, and mental health. Dr. Sitorius added that the State of Nebraska may want to pursue some of this funding for workforce development to do some planning.

# 5. Primary Care Office Report

Tom Rauner provided an update on the National Health Service Corps (NHSC) and Certified Rural Health Clinics. Nebraska has 46 NHSC Loan Repayment Program recipients today compared with 16 last year due to the federal stimulus funding. Of these 46 NHSC recipients, 30 are practicing in urban areas and 16 are practicing in rural areas. There will probably be funding for the next year or two. Mr. Rauner reported that he visited NHSC rural sites in Nebraska with regional administrators from Kansas City.

Tom Rauner stated that every 3 years he has to update the Governor-Designated shortage areas for Certified Rural Health Clinics. Mr. Rauner informed the Commission that he uses the state-designated family practice shortage area guidelines established by the Commission but tweaks them for the federal Governor-Designated guidelines. He asked the Commission to review and approve the guidelines before he submits them to the Office of Shortage Area Designation.

Dr. Mike Sitorius moved to approve the Governor-Designated Shortage Area Guidelines for federal primary care shortage areas. Dr. Suzanne Greenquist seconded the motion. Motion Carried. Yes: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

# 6. Program 175 – Rural Incentive Programs

## • Review Current Budget and Future Needs

Marlene Janssen provided the following report to the Commission.

Beginning Appropriation for each year (FY2009-10 and FY2010-11):

 General Funds
 \$ 362,068

 Cash Spending Authority
 \$1,544,016

 Total Appropriation
 \$1,906,084

## Special Legislative Session (Nov 2009):

Cuts of 2.5% to FY2009-10 and 5% to FY2010-11 to appropriation plus reduction in cash account of \$38,600 (2009-10) and \$77,201 (2010-11)

(NOTE: the reductions in the cash account are not shown in the appropriation. It is assumed that the reductions in cash are the Merck funds given in 2008 with spending authority for \$250,000 per year for 4 years.)

	FY2009-10	FY2010-11
General Funds	\$ 353,016	\$ 343,965
Cash Spending Authority	\$1,505,416	\$1,466,815
Total Appropriation	\$1,858,432	\$1,803,901

## Legislative Session 2010:

Reduced cash spending authority by \$300,000 and restored \$300,000 in general funds. The Legislature had previous reduced general funds and added cash spending authority for several years to "spend down" the cash account from student loan default/buyout collections.

In addition there was another 2% cut to the general funds during the 2010 session. This cut used the special session general fund appropriation as the base amount and then applied the 2% cut. This only happened with general funds not with cash spending authority.

	FY2010-11
General Funds	\$ 637,086 = (((\$362,068*0.95)*0.98) + \$300,000)
Cash Spending Authority	<u>\$1,166,815</u>
Total Appropriation	\$1,803,390

If the Commission approves all the rural incentive student loans and loan repayment today, there should be about \$140,000 left to be awarded for next year but this is for both state and local match spending authority. This means the Commission can only award about \$70,000 more in loan repayment during FY2010-11.

#### • Accounts Receivable Report

Marlene Janssen provided the following accounts receivable report stating that "accounts receivable" are the rural incentive program recipients who are choosing to buyout their contracts under the default terms instead of doing the practice obligation.

# **Student Loan Update**

#### Contract Buyout and Defaults

Rachel Blake, M.D. – current, making annual payments – next one is due around 8/1/10 Theresa Buck – PAID IN FULL as of June 15, 2010 Cari Brunner – (paid thru 12/31/09) is now 5 months behind, past due notice sent 5/19/10 Mary Metschke, D.D.S. – current Nicole Mitchell, M.D. – settlement agreement signed with consent judgment Stacy Schmitz, DDS – payments are current Les Veskrna, MD – current Nick Woodward, DDS-Ped – current

#### **Loan Repayment**

<u>Defaults</u> (left shortage area for non-shortage area)

Manda Clarke, APRN – current Kelley Hanau, APRN – paid up through May 31, 2011 Jessica Liesveld, NP – PAID IN FULL Richard Michael, MD – current Lisa Stenvers, P.A. – current

#### 7. CLOSED SESSION

Roger Wells moved to go to closed session to discuss Incentive Program Recipients' Requests, Student Loan Application (new and continuation), and Loan Repayment Applications. Dr. Mark Goodman seconded the motion. Motion Carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Dr. Rebecca Schroeder stated the RHAC would now go to closed session at 3:21 p.m. to discuss Incentive Program Recipients' Requests, Student Loan Applications (new and continuation), and Loan Repayment Applications, and asked the guests to please leave the room.

#### 8. OPEN SESSION – Motions on Closed Session Discussions

Dr. Mike Sitorius moved to go to open session at 3:40 p.m. Marty Fattig seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Dr. Mark Goodman moved to approve Dr. Bobbi Augustyn's request to amend her student loan contracts to the new default terms. Dr. Suzanne Greenquist seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Dr. Suzanne Greenquist moved to approve DeeLynne Bednar's request to extend her time to obtain her non-provisional license by 12 months from July 1, 2010. Dr. Mike Sitorius seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Dr. Mike Sitorius moved to approve Dr. Shaleah Jones request to change her employment status under the loan repayment program to full-time effective May 1, 2010 and amend her contract accordingly. Roger Wells seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Dr. Mark Goodman moved to approve Lawrence Chatters' request to extend his time by one year to complete his PhD due to classes not being offered. This means his effective graduation date will be August 2013. Roger Wells seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Roger Wells moved to approve student loan awards at the maximum level for FY2010-11. Marty Fattig seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Dr. Mike Sitorius moved to award the following continuation student loans for FY2010-11: Ryan Boyd (dental), James Hadden (dental), Natalie Fendrick (dental), Kara Kliewer (mental health), Gregory McClanahan (medical), Jessica Ott (medical), Brooke Pelster (mental health), Noah Piskorski (dental), Kimberly Salber (physician assistant), and Anitra Warrior (PhD). Roger Wells seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Roger Wells moved to award the following new student loans for FY2010-11: Tamara Kenning (mental health), Donielle Larson (mental health), Beth Sholes (mental health), Amanda Fangmeier (mental health), Shane Merchant (physician assistant), Kate Wawrzynkiesicz (dental), Jason Grant (dental), and Kaitlyn Peterson (physician assistant). Marty Fattig seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

Marty Fattig moved to approve the following loan repayment applications with practice obligation dates beginning as shown:

Erica Haake, M.D., 9/1/2010
Jesse Carr, D.D.S., 7/1/2010
Cameron Sidak, M.D., 8/1/2010
Mary Kersenbrock, D.D.S., 8/1/2010
Brian Nice, P.A., 4/1/2010
Rachel Benson, D.D.S, 7/1/2010
Nancy Trimble, P.A., 6/1/2010
Jeromy Warner, PhD, 6/1/2010
Susan Wollenberg, P.A., 6/1/2010
Ross Hansen, P.A., 6/1/2010
Stacy Yagow, O.T., 7/1/2010
Matthew Gatlin, P.A., 8/1/2010
Kurt Schmeckpeper, P.A., 6/1/2010

and to move Dr. Brenda Kopriva's application to the waiting list because she will not be eligible for loan repayment until around August 1, 2011. Dr. Mike Sitorius seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

#### 9. Other Business

## • Medicaid/Magellan Reimbursement Cuts – Impact on Rural Nebraska

Dr. Rebecca Schroeder reported that the Medicaid/Magellan reimbursement cuts are an ongoing concern for providers in general and especially for rural providers. These cuts are especially worrisome given the terminations of major state contracts that have been in the news lately. Dr. Schroeder stated that providers are continuing to monitor this issue.

#### • Workforce 2020

Roger Wells reported he will be meeting with 4 or 5 interested parties during the Nebraska Rural Health Conference in Kearney in September to look at developing "centers of excellence" throughout the State.

Dennis Berens reported that the USDA is focusing on "regional" instead of geographic boundary lines. This is the same thing Roger Wells is trying to accomplish through the Workforce 2020 project by focusing on all the concerns to rural healthcare instead of piecemeal.

## • Certified Rural Health Clinics - Physician Quality Reporting Initiative

Roger Wells stated he did not have anything to report at this time.

#### Other

The Commission discussed supporting Dr. Brian Buhlke from Central City, as a nominee for the National Health Care Workforce Commission. Marty Fattig stated that Dr. Buhlke is a very strong advocate for legislative issues in the area of rural health.

Roger Wells moved to have Dr. Rebecca Schroeder send a letter of support for Dr. Buhlke as a nominee for the National Health Care Workforce Commission. Marty Fattig seconded the motion. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.

(It was learned after the Rural Health Advisory Commission meeting that the deadline for nominations to the National Health Care Workforce Commission had passed. Marlene Janssen worked with Dr. Rebecca Schroeder to instead nominate Dr. Buhlke for the Nebraska Rural Health Association Rural Provider of Year and for the UNMC Jack Elliott Award on behalf of the RHAC.)

## 10. Adjourn

Roger Wells moved to adjourn at 3:50 p.m. No second necessary. Motion carried. YES: Boswell, Fattig, Goodman, Greenquist, Miller, Rogers, Sitorius, Vandegrift, Wells; NO: None; Absent: Adams, Dilly, and Kralik.